# STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

JUL 2 4 2017

| I. Name of Lobbyist(s)                                                                  | Ellen G                                       | Scarponi            | <del>-</del>                                      | NEW HAMPSHIRE DEPARTMENT OF STA   |
|-----------------------------------------------------------------------------------------|-----------------------------------------------|---------------------|---------------------------------------------------|-----------------------------------|
| II. Name of lobbyist's part                                                             | nership, firm or corpo                        | ration, if any:     |                                                   | DEFAILTMENT OF OTA                |
|                                                                                         | Fair Dist                                     | COMMUNICA           | hóns                                              |                                   |
| (Name of p                                                                              | Fair Point<br>artnership, firm or corpora     | ation)              | N D                                               |                                   |
|                                                                                         | 770 Flm S                                     | Street W            | onchester (State)                                 | 14 03101                          |
| Business Address: (Street)                                                              | (To                                           | own/City)           | (State)                                           | (Zip Code)                        |
| (lal3) <u>656-8118</u><br>(Telephone)                                                   | ( )                                           | (Fax)               | e-mail_esc                                        | carponie fairpont.com             |
| III. This statement covers: reportable expense transac                                  |                                               |                     |                                                   | ı may file a separate report for  |
| All reportable transaction                                                              |                                               |                     |                                                   | to the following client:          |
|                                                                                         | Fair Point C                                  | communication       | 5                                                 |                                   |
| (Full                                                                                   | Name of Client as it appe                     | ars on the Lobbyist | Registration Form)                                |                                   |
|                                                                                         |                                               | ding the lobbyist's | family), or the lobb                              | ying firm listed below which are  |
|                                                                                         | il 26, 2017 []<br>n date of registration to 3 | /31/17 acti         | July 26, 2017 <b>X</b><br>wity from 4/1/17 to 6/3 |                                   |
|                                                                                         | ober 25, 2017                                 | act                 | January 31, 2018<br>vity from 10/1/17 to 1        |                                   |
| V. There have been no for<br>If this box is checked, comple<br>Concord, NH 03301.       |                                               |                     |                                                   |                                   |
| VI. Check if additional rep                                                             |                                               |                     |                                                   |                                   |
| If you have received fee                                                                |                                               |                     |                                                   |                                   |
| ☐ If you have paid an hone Expense Reimbursement                                        | orarium or reimbursed e                       | expenses, you mus   | t file Addendum B                                 | - Report of Honorariums or        |
| •                                                                                       | r family has made polit                       | ical contributions, | you must file Adde                                | ndum C- Political Contributions   |
| Sworn Statement/Affirmat<br>I have read RSA 15, RSA 15<br>and complete to the best of r | 5-B, RSA 14-C and RSA                         |                     | swear or affirm that                              | the foregoing information is true |
| (Signature of lobbyist)  Ellen G. Scr                                                   | Layoni                                        | -                   | 7.24.                                             | 201 <del>7</del><br>(Date)        |
| Ellon G. Scr<br>(Print Name of lobbyist)                                                | rponi                                         | _                   |                                                   |                                   |

### P L E A S E P R I N T

# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) Ellen G. Scarponi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                         |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--|--|--|
| II. Name of lobbyist's partnership, firm or corporation, if any:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |  |  |  |
| Fair Point Communications (Name of partnership, firm or corporation)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                         |  |  |  |
| III. Name of Client Fair Point Communications                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Date 7.24.2017                          |  |  |  |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | relations, or public relations services |  |  |  |
| a) Total of all fees received in this reporting period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | a)\$6435                                |  |  |  |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | b) \$8190<br>ear)                       |  |  |  |
| c) Total of all fees received to date (Add lines a and b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | c)\$ 14625                              |  |  |  |
| d) Indicate the amount of any such fees that are due, but have not yet been paid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | d) \$                                   |  |  |  |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A. |                                         |  |  |  |
| <ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | a)\$ <b>i</b> 435                       |  |  |  |
| in a), of \$25 or less.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | b) \$                                   |  |  |  |
| c) Total of all itemized expenditures reported in detail in section VI.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | c) \$                                   |  |  |  |

| d) Total expenses for this reporting period (Add lines a, b and c)                                                                                       | d)\$6435                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e)\$8190                           |
| f) Total of all expenses year to date                                                                                                                    | ns14625                            |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from le period, including by whom paid or to whom charged.  | obbying fees during this reporting |
| Paid to:                                                                                                                                                 | Amount:                            |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          | \$                                 |
|                                                                                                                                                          |                                    |
|                                                                                                                                                          |                                    |
|                                                                                                                                                          |                                    |
| Sworn Statement/Affirmation by Lobbyist                                                                                                                  |                                    |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.                         | m that the foregoing information   |
| (Signature of lobbyist)  Ellen G. Scarpeni (Print Name of lobbyist)                                                                                      | 7.24.2017<br>(Date)                |
| (digitature of loopyist)                                                                                                                                 | (Date)                             |
| Print Name of lobbyist)                                                                                                                                  |                                    |